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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/605,042	06/26/2000	Xue-Ru Wu	WU=43C	6615

1444 7590 08/05/2004

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[REDACTED] EXAMINER

KAUSHAL, SUMESH

ART UNIT	PAPER NUMBER
	1636

DATE MAILED: 08/05/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)
	09/605,042	WU ET AL.
	Examiner Sumesh Kaushal Ph.D.	Art Unit 1636

All participants (applicant, applicant's representative, PTO personnel):

(1) Ex. Sumesh Kaushal. (3) Allen Yun.

(2) P.Ex. Jeffrey Fredman. (4) Dr. Wu

Date of Interview: 03 August 2004.

Type: a) Telephonic b) Video Conference
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.
If Yes, brief description: _____.

Claim(s) discussed: all.

Identification of prior art discussed: None.

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: _____.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Applicant is considering amending the claims to ~~add~~ address the written description issues. There was agreement that the enablement rejection would likely fall.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.



8/3/04
Examiner's signature, if required